

State of Hawaii  
DEPARTMENT OF LAND AND NATURAL RESOURCES  
Division of Aquatic Resources  
Honolulu, Hawaii 96813

March 11, 2010

Board of Land  
and Natural Resources  
Honolulu, Hawaii

Request for Approval of Special Activity Permit 2010-58 for Mr. Ross M. Brown of  
Trout Unlimited and Designated Assistants

The applicant proposes to place rainbow trout fry into the Kokee Public Fishing Area, Kauai. These activities include the placing of trout eyed eggs and/or fry in streams to supplement the existing population of rainbow trout in the public fishing area.

RECOMMENDATION:

“That the Board authorize and approve, with stated conditions, this Special Activity Permit for Mr. Ross M. Brown of Trout Unlimited.”

Respectfully submitted,



DAN POLHEMUS  
Administrator

APPROVED FOR SUBMITTAL:



LAURA H. THIELEN  
Chairperson

Department of Land & Natural Resources  
DIVISION OF AQUATIC RESOURCES  
1151 Punchbowl Street, Room 330  
Honolulu, Hawaii 96813

Date Issued: March 11, 2010

Valid Not Longer Than  
June 30, 2010

### SPECIAL ACTIVITY PERMIT

The Department of Land and Natural Resources hereby grants permission for certain activities involving aquatic organisms belonging to the people of Hawaii, under Section 187A-6, Hawaii Revised Statutes, and other applicable laws.

The Permittees are

Name:	Ross M. Brown	Address:	Waikahe 'olu Chapter of Hawaii
Title:	President		9 Puukani Place
Affiliation:	Trout Unlimited		Kailua, HI 96734

This permit is issued, subject to the general and special conditions, to place underwater boxes to stock rainbow trout in listed streams in the Kokee Public Fishing Area, Kauai. This permit does not authorize the taking of aquatic life.

#### I. GENERAL CONDITIONS:

- A. This permit does not make the Department of Land and Natural Resources or the State of Hawaii liable in any way for any claim of personal injury or property damage to the permittee or assistants which may occur during any activity conducted under this permit; moreover, the permittee and all assistants agree to hold the State harmless against any and all claims of personal injury, death or property damage resulting from activities of the permittee or any assistant.
- B. This permit conveys a privilege to engage in only those activities under the jurisdiction of the Department of Land and Natural Resources. The permittee is responsible for complying with all applicable County, State, and Federal requirements. The permit does not convey any privilege of access over or through private property.
- C. The permittee and each assistant are individually responsible and accountable for their actions while conducting activities authorized under this permit; additionally, the permittee is responsible and accountable for the actions of the permittee's assistants.
- D. This permit is not transferable or assignable. Any person whose name does not appear on this permit and is conducting any activity described herein is subject to prosecution for violation of State laws.

- E. The permittee may request changes to the permit. Any such request to make changes to the permit must be made in writing and received by the Department at least thirty days prior to the change. The addition of new assistants will require each individual to sign the Attachment on page 7 stating that they have read, understood, and agree to abide by all general and special permit conditions. No change may be implemented without written approval from the Department.
- F. The permittee may request to:
  - 1. Add assistants to the permit;
  - 2. Add another permittee or replace an existing permittee in the manner stated above; and
  - 3. Change the activities authorized under this permit.
- G. The permittee or their assistant(s) must have with them a copy of this permit while conducting activities authorized by this permit.
- H. This permit authorizes collection of organisms protected by Federal law only with prior appropriate Federal authority, which must be described on Page 1 of this permit (if applicable).
- I. This permit expires on the date indicated on Page 1. Within one month of the expiration date, the permittee must return this permit to the address listed on the upper left corner of page 1 with complete information on all activities authorized under this permit, on the attached Activity Report form.
- J. The permittee and assistants agree to provide access to data obtained under authority of this permit upon request of the Division of Aquatic Resources, and to provide to the Division a copy of each report, published for distribution, prepared with data obtained under this permit. The permittee agrees to provide the Division of Aquatic Resources access to organisms obtained and held under this permit for on-site inspection.
- K. A violation of any terms or condition of this permit or any violation of State law not covered by this permit may result in revocation of the permit and other penalties as provided by law. In addition, the Department may consider any such violation as grounds for denying any future permit applications.

## II. SPECIAL CONDITIONS

- A. This permit authorizes the placement of up to 21 Whitlock-Viebert underwater plastic mesh boxes, buried in the substrate, with up to 500 rainbow trout eggs in each box. Seven boxes will be placed in each of three streams – Kawaikoi, Mohihi, & Waiakoali. The purpose of the boxes are to stock fry rainbow trout into the public fishing area.

- B. The boxes with eggs may also be stored temporarily at Punahou School, Oahu prior to deployment on Kauai. All boxes must be removed within nine weeks after placement, provided that all boxes will be removed from the streams by June 30, 2010.
- C. The eggs must either be DAR inspected on Oahu or certified disease free prior to deployment.
- D. The permittee shall take before and after photos of the boxes on-site and provide those photos in the activity report pursuant to general condition I. above. The purpose of the photos is to document the boxes and their impacts on the stream bed and water flow.
- E. No aquatic life will be taken for this project.
- F. The use of any chemical substance is expressly prohibited under this permit.
- G. The primary permittee and designated assistants are required to obtain permission before entering upon lands or waters not under the jurisdiction of the Department (see "C", General Conditions, page 2 of this permit).
- H. This permit does not by implication authorize the primary permittee or any designated assistant to engage in any other activity that is in violation of any other State, Federal or County law, regulation or ordinance.

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LAURA H. THIELEN, Chairperson  
Department of Land and Natural Resources

cc: (x) DOCARE  
(x) DAR - Kauai

SIGNATURES AND AGREEMENT

By my signature below, I acknowledge receipt and understanding of the general and special conditions of this Special Activity Permit. Further, I agree to abide by all of these conditions when conducting activities authorized by this permit.

PRINCIPAL PERMITTEES: \_\_\_\_\_  
Ross M. Brown

DESIGNATED ASSISTANTS:

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: Dr. James Dimarchi Print Name: Deane Gonzalez

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: David Blanchette Print Name: C. Wayne Hodges

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

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Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

ACTIVITY REPORT

Results of all activities performed under authority of this permit must be reported on this form (or copies) within one month after the permit expires (see first page). Use as many sheets as you need. Submit the report to the Division of Aquatic Resources at 1151 Punchbowl Street, Room 330, Honolulu, HI 96813.

Date	Location	Common or Scientific Name	Quantity Collected*	Disposition of Specimens
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Permittee Signatures

_____ Printed name	_____ Signature	_____ Date
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_____ Printed name	_____ Signature	_____ Date
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\*If salvaged (collected because the specimen was dead or injured already), please detail circumstances: condition (dead, or describe extent of injury), how or from whom the specimen was obtained.

## ATTACHMENT FOR DESIGNATED ASSISTANTS ONLY

Primary Permittee: Ross M. Brown

I, being the primary permittee, hereby acknowledge the addition of the following designated assistants.

\_\_\_\_\_  
Ross M. Brown\_\_\_\_\_  
Date

## ADDITIONAL DESIGNATED ASSISTANTS

We, the undersigned, have read, understand, and agree to all conditions stipulated in the above Special Activity Permit.

Signature \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_

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